Statewide Advisory Council for the Integration of Community-based Services (SACICS)
Minutes – September 20, 2006
HHR Secretary Marilyn Tavenner, Chair   VDA Commissioner Julie Christopher, Vice-Chair

Present: Gail Jaspen (for Secretary Tavenner), Julie Christopher, Gigi Amateau, Meade Boswell, Bob Burton, Mary-Margaret Cash, Tim Catherman, Don Driver, Leonard Eshmont, Brenda Goodman, Suzanne Gore, Susan Hart, Vickie Johnson-Scott, Cindi Jones, Pam Kestner-Chappelear, Dexter Klock, Paul Lavigne, Bill Massey, Gail Nardi, Leslie Prince, Katie Roeper, Thelma Bland Watson, Karen Walters (for Allyson Tysinger and Jane Hickey)

Introduction and Overview of SACICS	Deputy Secretary Jaspen opened the meeting with introductions. She stated the purpose of the meeting was for all members to: 1) Gain a good understanding of the goals, progress and next steps of No Wrong Door in Virginia and 2) Use this information to begin identifying the benefits and barriers to using the system in their agency or organization. She then provided an overview of SACICS and advised that SACICS actually started meeting before the Aging and Disability Resource Center (ADRC) grant was received and is the oversight group for the grant as well for the overall implementation of No Wrong Door in Virginia. The ADRC grant provided funding to lay the groundwork for developing technology and streamlining access to services by identifying and resolving barriers to access for consumers. The state continues to seek additional grants and funding streams to fund Virginia's No Wrong Door. The SACICS Council has representation from both the state and local level. At the state level, there is representation from the state agencies most involved with the delivery of long-term support services as well as representation from some statewide groups that bring unique knowledge to the project – Centers for Independent Living, Community Service Boards, 2-1-1 Virginia and the state's technology partner, SeniorNavigator. Rounding out the Council is representation from the local level through Area Agencies on Aging and Departments of Social Services in the 3 pilot areas. Consumer representation is critical to the success of this group and they will be added in the near future. The Department for the Aging is the lead state agency for No Wrong Door at the state and local level. It is envisioned that the SACICS Council will provide oversight through the three year ADRC grant and will also serve as the advisory Council for Goal 1 of the System Transformation Grant. That goal expands the system to become consumer-directed. VDA will lead both activities.
No Wrong Door Overview	Tim Catherman provided an overview of the ADRC grant and No Wrong Door.
Technology Development	Katie Roeper from SeniorNavigator and Leonard Eshmont from VDA provided an overview of the technology development for the NWD system. In developing the system, focus groups were held to understand the system processes as they existed at that time. The information from those groups was that in Virginia: ➢ There was considerable overlap between Information and Referral, Intake, and Case Management within organizations and between agencies. ➢ The UAI was the cornerstone to consistent collection of assessment information among providers.

	➢ Both public and private providers thought there would be great value in developing a HIPAA-compliant database of shared clients. ➢ There was great interest in eliminating duplicated collection of the same information from service provider to service provider. Based on that information, the technology tools were developed to: ➢ Integrate and cross populate among each other, i.e., the information in the Information and Referral tool would appear in the UAI and Case Management tools and vice versa. ➢ Support the existing processes such as the UAI ➢ Save providers time. ➢ Avoid duplicate entry. Over the past 9 months, through a partnership with VDA, SeniorNavigator, and RTZ Associates, a long-term care technology solutions company out of California and a leader in PACE technology, a library of tools have been customized for Virginia. Together they help a service provider assess, refer, manage, determine eligibility, enroll, track, and record client-specific as well as aggregate information. The tools are password protected and client-level information is viewed based on "need-to-know" permissions The current usage of the tools is as follows: • Three AAAs are using the I & R tool exclusively. • One private community resource center is using it for I & R for all ages. • A large University HR Department is considering the I & R tool to help EAP staff to address the needs of working caregivers. • Three additional AAAs are currently using or are in the process of being trained on the entire library of tools.
Pilot Updates	**Peninsula Pilot Report** - see attached report **Richmond Pilot Report** - see attached report **Valley Pilot Report** - see attached report
Streamlining Access Plan	A requirement for the 2005 ADRC grantees is to submit a Streamlining Access plan by September 30, 2006. The plan includes goals and action steps to overcome barriers to access for consumers and requires the approving signature of the agency heads for DMAS, DRS, DSS and VDA. The plan was developed using an assessment that shows the 7 "hoops" a consumer has to go through in order to get and keep services. (See attached document). Because assessment and eligibility determinations are overwhelmingly significant

	barriers, the initial focus of the Streamlining Access plan is on overcoming barriers in those processes. SACICS will continue identifying barriers to access in the other "hoops" as we go forward. AoA and CMS expect continual updates to the plan as additional critical barriers are identified at the state and local levels. The first planning meeting was held on 8/16 and included: Gail Jaspen, SHHR; Mary Margaret Cash, DRS; Cindi Jones, DMAS, Karen Lawson, DMAS, Tony Conyers, DSS; Vicki Johnson-Scott, DSS and Skip Sorenson, DSS. A subsequent meeting was held on 9/12 to finalize the plan. Additional input was obtained from the Valley Advisory Council and care coordinators from 2 of the pilot locations. The Streamlining Access Committee may become a standing committee of SACICS. Other ad hoc committees will be added as the work of SACICS is coordinated with the planning for Systems Transformation.
Systems Transformation Grant	Suzanne Gore from DMAS announced that Virginia has been awarded the Systems Transformation Grant (STG), but do not yet know the actual amount of the grant. Of the six goals that were options in the STG, Virginia selected the following three to pursue: **Goal 1**. Improved Access to Long-Term Support Services: Expansion of a One-Stop-System **Goal 2**. Increased Choice and Control: Enhancement of Self-Directed Service Delivery System **Goal 4** Transformation of Information Technology (IT) to Support Systems Change Goal #1 is the expansion of the No Wrong Door system so that it becomes consumer-directed. By the end of the five-year grant period individuals and their families will be able to: • Access "No Wrong Door" to find and apply for long-term supports, through the Internet, informal resources in the community, or by visiting a physical site; • Enjoy increased choice in self-direction, the availability of person-centered planning and individual budgeting options; • Manage their own long-term support services through a web-based system; • Access services under the Mental Retardation and Day Support Waivers more quickly through an upgraded, web-based system that will automate antiquated, paper-driven processes and streamline approval systems; and • Have increased confidence in service quality through a web-based, critical incident reporting system that will enable the state and local communities to track, identify trends, and improve the quality of services provided. There will be a nine month planning period for STG that will wrap up in June. The grant provides for an STG Coordinator position in Secretary Tavenner's office who will oversee the grant.
Benefits of No Wrong Door	Several members expressed their thoughts on the benefits of No Wrong Door. These included: ○ A person at the local level can go to one place for support service information. DMAS believes this is critical to moving to providing more home and community-based services.

	- o It would be helpful to have Secretary Tavenner send a letter to state agencies advising them that No Wrong Door is a reality and that they need to encourage their local agencies to participate at the local level. - o It will help seniors with hearing loss know about the resources available at Dept. of Deaf and Hard of Hearing. Often, DDHH is not thought of by other service providers as a resource for seniors. By having a central coordination point for all services, the full array of options is available to everyone. - o DSS is committed to making the NWD process work so that consumers don't have to continue to complete duplicate paperwork and receive services more quickly. In particular, it will increase the speed and effectiveness of providing adult protective services. - o 2-1-1 Virginia will benefit from No Wrong Door because they will know that the people to whom they provide referral information will be getting to the right "door."
Next Steps and Assignments	Next Steps **All SACICS members** will identify benefits and barriers to using the system in their agency or the organizations they represent and send those to **Julie Christopher** by **October 20.** **Streamlining Access Workgroup** will begin implementing the Streamlining Access plan. **VDA, SeniorNavigator and pilots** will develop data sharing protocol for non-state agencies. **Leonard Eshmont** will add grant documents, reports and other items on NWD to the VDA website so there is one central place to find background information on the grant, plans and progress. **HHR** and **VDA** will: - o Develop a draft communication for agencies to share with their local counterparts that demonstrates support for participation in the No Wrong Door system and participation in local advisory councils. - o Coordinate discussions with AG's office, DMAS, DSS, DRS, VDH, DMHMRSAS and others to revise UAI client consent form and develop MOUs for data sharing. - o Coordinate discussions with state agencies regarding middleware options for connecting the No Wrong Door system to existing systems to avoid duplicate entry. - o Develop criteria for next three pilot communities.
Next meeting	The next SACICS meeting will be held in December. The date and location are to be determined.